

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL049028	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/10/2015
NAME OF PROVIDER OR SUPPLIER AURORA OF STATESVILLE		STREET ADDRESS, CITY, STATE, ZIP CODE 1902 ORA DRIVE STATESVILLE, NC 28625		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report of a Biennial Construction Survey by Frank Strickland and Dennis Harrell on 12/10/2015: Records indicate this facility was first licensed on 04/02/1990 as a HA and an addition of a Special Care Unit was licensed on 05/12/1994. This facility is currently licensed for 80 Beds including a 28 Bed Special Care Unit. Therefore, this facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and the 1978 and the 1991 Edition, of the North Carolina Building Code(s), Institutional Occupancy. Deficiencies were cited and a Plan of Correction is required.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;	C 101		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1-Based on observation, the facility does not meet the Building Code requirements for components of the HVAC distribution system which penetrate the one-hour roof/ceiling assembly. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin. Findings on 12/10/2015: The ceiling HVAC supply diffusers located in the Kitchen, that penetrate the one-hour roof/ceiling construction, do not have any identified fire protection components in place.	C 101		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1-Based on observation, the facility did not have current documentation on site to maintain the safety of the facility. This could affect all residents and staff in the event emergency. Findings on 12/10/2015: The facility does not have current Fire Alarm inspection and Sprinkler System inspection reports for review.	C 111		

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C 166	Continued From page 2	C 166		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained and serviced the HVAC supply and return air grilles. This will effect all residents and staff. Findings on 12/10/2015: The return-air grilles have excessive particulate build-up located in Dining Hall, Bathrooms and Hallways. 2-Based on Observation, the facility failed to provide an environment in accordance with this Rule by not providing ventilation where odors are generated. This could affect residents and staff by subjecting them to house-keeping odors. Findings on 12/10/2015: The exhaust fans were not operational for mechanical ventilation at the following locations: (a) "A" Hall Staff Bathroom (b) "A" Hall Cart Room	C 166		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 189		

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C 189	<p>Continued From page 3</p> <p>REQUIREMENTS</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1-Based on observation, the facility has not maintained the door hardware in the facility. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 12/10/2015: The door hardware is not operational for Room 32.</p> <p>2-Based on observations, the facility fire protection equipment was not maintained in a safe manner. This could effect all residents and staff by not providing a complete 1 hour fire rated ceiling.</p> <p>Findings on 12/10/2015: There is a dropped sprinkler head escutcheon located in the Nurse's Station in "A" Hall.</p> <p>3-Based on observations, the facility fire protection equipment and life-safety components have not been maintained in a safe manner. This will effect all residents and staff by not providing illumination for all paths of egress in the event of an emergency.</p> <p>Findings on 12/10/2015: The emergency life-safety devices failed to</p>	C 189		

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C 189	<p>Continued From page 4</p> <p>activate when tested at the following locations: (a) The entire Emergency Light System in "A" Hall (b) Emergency Light in the SCU Courtyard (c) Hall Exit Sign in SCU is not supported from ceiling mount base</p> <p>4-Based on observation, the facility has not maintained in a safe manner due to breaches of the one-hour stairway construction by invalidating its integrity by the removal of life-safety components. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 12/10/2015: The door closures have been removed on the one-hour rated fire doors at the base of the stairway to the basement.</p> <p>5-Based on observation, the facility has not maintained in a safe manner due to breaches of wall construction. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 12/10/2015: The sheet rock behind the Laundry Room washer/dryer units is severely damaged with a 12" x 12" hole in the wall and damaged surrounding areas in "A" Hall.</p> <p>6-Based on observation, the facility has not maintained in a safe manner the protective covers of all electrical devices and presents a severe hazard. This could affect all residents and staff.</p> <p>Findings on 12/10/2015: The floor receptacles that are located in the SCU Living Room do not have electrical cover plates.</p>	C 189		

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C 189	Continued From page 5 7-Based on observation, the facility has not maintained the one-hour roof/ceiling assembly construction that invalidates its integrity. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin. Findings on 12/10/2015: There are electrical 3" conduit ceiling penetrations that are not sealed with an approved fire resistant material in the Mechanical in "A" Hall. 8-Based on observation, the facility has not maintained acces to all spaces throughout the facility in an event of an emergency. Findings on 12/10/2015: The facility staff does not have the key to access Resident Room 1. Staff informed surveyors that only the resident has the key and the resident was in PT at the of the survey.	C 189		
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.	C 191		

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C 191	Continued From page 6 This Rule is not met as evidenced by: 1-Based on observation, the facility was not maintained in a safe manner by allowing the use of portable heaters that are prohibited. This could affect all residents and staff if a heater generates a fire. Findings on 12/10/2015: A portable electric heater was found in the SCU Nurse's Station Office.	C 191		
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1-Based on Observation, the facility failed to provide an environment in accordance with this Rule by not providing ventilation where odors are generated. This could affect residents and staff by subjecting them to house-keeping odors.	C 199		

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C 199	Continued From page 7 Findings on 12/10/2015: No mechanical exhaust ventilation has been provided in the "A" Hall Spa Shower Room.	C 199		